<u>Transcript of 37min mp3 dr kaufman Healthy Living Livestream</u> <u>How To Cure Diabetes In</u> Three Weeks

Hello, and welcome to doctor Andrew Kaufman's Healthy Living Livestream. My name is Alexander Raskovich, and the topic of this week is how to cure diabetes in three weeks. Before I bring Andy on screen, let me mention that if you'd like to ask if you'd like to, if you'd like Andy to answer your questions live, then feel free to leave them in the comment section below, and I'll collect them and bring them forth immediately after the presentation. A replay of this presentation will be available right after the live stream on Rumble and Facebook. Without having been said, I will now bring on doctor Andrew Kaufman.

Hello, everyone, and welcome to another exciting healthy living livestream. I wanna make a brief announcement, before we get started with today's presentation that, last evening began my natural detox mini course, which is a free offering to anyone who, registers. And, hopefully, many of you were there with me last night. And I spoke about basically, it's called healing from the inside out, how your body handles toxins and gets rid of them naturally and how you can support essentially your body's normal detoxification processes. And you can watch the replay of that, if you register.

And the next installment, class number two, is coming up tomorrow evening at eight PM eastern. And, I will be talking about the pitfalls of detoxification, especially cleansing reactions, and how you can prevent those from getting in the way of your health restoration. So please check-in the chat for the link to register for that, exciting free offering, Nature's Detox Mini Course. Okay. Today, we are going to be speaking about diabetes and specifically type two diabetes.

So I'm gonna start off just with some basics about exactly what that is. So diabetes is kind of defined as an alteration in your body's ability to manage its blood sugar levels. Those are the levels of glucose, essentially, the body's main sugar, and it converts other dietary sugars into glucose. And how it regulates the levels in your blood, because from the blood, they would get taken up by the tissues to undergo carbohydrate metabolism. And this is regulated by a hormone, insulin.

I'm sure many of you know this and this is kind of a review. But insulin is secreted by the pancreas and when blood sugar comes in from, you know, our diet or other sources into the blood, and it directs the sugar in the blood to essentially go inside the cells to be taken up and leave the blood or to stay in the blood. And it also, of course, has, regulatory abilities over fat storage and is related to, our weight stature, and obesity as well. And when you develop type two diabetes, it is said to be due to insulin resistance, where the body does not respond to insulin in terms of taking blood sugar up into the cells, and that leaves the blood sugar in sorry, the sugar in the blood at higher levels where it becomes toxic, to other organs and tissues, and those lead to complications of diabetes such as peripheral vascular disease, vision loss, blindness, you know, heart attacks, strokes, and all the many other, issues that we know happens over time related and associated with diabetes. So I'm not gonna give the specific numbers, that

define, you know, whether it's prediabetes or diabetes because those change over time and are not really important.

The important thing is that there is dysregulation in this system. And, of course, that leads to various types of interventions, mostly with pharmaceuticals, which don't really, change any of the underlying issues. So let's look at how many people are affected, by diabetes. And, also, let me say that those complications lead to a lot of disability and death, and those numbers are are quite staggering as well. We're not gonna look at them specifically today.

But, Alexander, if you wanna bring up the first slide. And this is a a large, study that was done. And interestingly, it was funded by the Bill and Melinda Gates Foundation. So I'll let you conclude, what the relevance of that is. But if we can look at the trend in the next slide, so what they did is they looked at, the prevalence, which is how many people at in any given moment, suffer from a condition.

In this case, type, it's diabetes type one and type two. And this is global. So this is, worldwide. I mean, not every single country, but they survey quite a number of countries, in this study. And you can see they looked at actual data from nineteen ninety at the left side of the graph up until two thousand twenty.

And then after that, it's essentially a prediction or an extrapolation of the trend line, and you can see where it's going. So as of twenty twenty, you can see that the prevalence is somewhere between five and seven and a half percent, and this is worldwide. And you can see the trend that there is a, a fairly sharp, rise. And I want you to try to remember the shape of this graph because we're gonna look at some other graphs that have very similar shapes over the same time period of nineteen ninety to twenty twenty. And you can see here by twenty fifty that it's predicted to be ten percent of the world population suffering from diabetes.

Now in the United States, we're actually ahead of the global curve here, and we're already at very close to ten percent. So one in ten, Americans suffer from diabetes. Now you can see also on this chart that there is a slight increase in type one diabetes, the red line on the bottom, but it is not nearly as dramatic as the rise in type two. And if we looked at type two trends for different age groups, we would see a remarkable increase in, young young people, especially, in even in adolescence and preadolescents, where previously that was never really seen at all. So this is, quite, a prevalent and important condition.

We all know people, who have been diagnosed with diabetes. So I would think there would be considerable effort to try and find the cause or that the cause would be known. And I wonder if many of you out there think that the actual cause is known, that it's just by too much sugar or carbohydrates in your diet. However, when you start to look around the Internet, you will find, virtually all the websites. So, you know, the Mayo Clinic, the Cleveland Clinic, the American Diabetes Association, the Centers for Disease Control, where they all have sections on their web page that says what causes diabetes.

And then in there, they won't list the cause. Now in some places like in the American Diabetic Association, they readily admit that the cause is unknown, according to science. But many of the other sites will just list risk factors, and those are really just statistical covariates so that there's some

correlation or association, but it doesn't tell you anything about the causal relationship. So, for example, there's a high correlation between diabetes and obesity. Right?

But does obesity cause diabetes? Does diabetes cause obesity? Or is there a common cause that leads to both factors? And that is the kind of missing part, but they definitely, you know, even if it was obesity that caused diabetes, then you'd have to say, well, what's causing obesity? Because it's not just eating more if you look at the trends.

That's not, doesn't explain it. So, we have, you know, basically, the literature just reporting risk factors, which maybe help you predict if you'll you'll develop diabetes, but they offer no explanation about the underlying cause. So let's look at some trends in food consumption to see if there are any clues. And, Alex, if you wanna bring up the next set of slides. So this, was from a very interesting study, and it really looks at food availability rather than actual consumption because it's looking at a hundred years of historical or more than a hundred years.

I think it goes back to early eighteen hundred. But if we can look at the next slide on the trends in dietary fats, And, of course, you can zoom in and look at the nineteen ninety to twenty twenty data, which would be at the right side of the graph about one fifth of the graph on the right side. But you can see here the trends, away from animal fats and toward seed oils and plant fats. Now in the top graph, there's a line that kind of starts. It goes straight up, about halfway through the data, and, it's gray and goes up very precipitously.

And that are is the graph for seed oil availability. And you can see that it trends very consistently with the rise in type two diabetes. And on the bottom graph, the brown or orange section represents, plant based, fats used in food and the blue section is animal fats. So you could see there has been a very significant trend away from animal fats like, you know, lard and tallow, towards plant fats, which predominantly in in the present, include seed oils. Now in the top graph, there's a yellow line that represents other plant fats, besides refined seed oils like margarines and hydrogenated fats, etcetera.

So that's part of the trend you'll see on the bottom as well. And then, this study also looked at sweeteners. If you go to the next slide. And you can see that, the orange line on the bottom represents, high fructose corn syrup. And you can see that that trend starts right around nineteen ninety and seems to go up from there, and then there's been a little bit of a a trail off.

But you can see that in that period from nineteen ninety to, twenty nineteen, overall, in the top yellow bar, the amount of added sweeteners did increase, then it decreased a little bit. So there is a possibility that, you know, sugar and high fructose corn syrup is involved, but it doesn't follow the same trend like we saw for the seed oils. So we've talked about some, you know, food factors, and I'm not sure if you really we should consider seed oils as food, but they know we know that they may be, implicated in these metabolic disorders, and there is some data showing their interference with insulin function. But what about chemicals that are not food? So let's, bring up the next slide, which is just looks at the output of the chemical industry, and it's a very similar time frame to the diabetes data.

And you can see that if we drew a trend line in here, it would be very similar in slope to the line we saw for type two diabetes. Now this is a crude measure, of course, because this includes, you know, all chemical manufacturing, not just, specific chemicals that have been, implicated with diabetes. But, I think it is quite telling that it shows a parallel kind of relationship. Now we can look, if you wanna bring up the next slide, at some specific studies, where they looked at endogenous, sorry, in environmental chemical exposure and its relationship to diabetes. And sorry, I can't see the screen with you, so I gotta bring this up on my little device.

So this, study, which was done by scientists from, Johns Hopkins, predominantly is called Environmental Chemicals and Type two Diabetes, an Updated Systematic Review, and this was published in two thirteen. So this has been known about for quite a while and this is not the only study I'm gonna show you but the highlighted portion I'm gonna read. Increasing evidence supports the role of environmental chemicals in diabetes development, including arsenic and other metals, persistent organic pollutants, phthalates, and bisphenol a. So let me just discuss those particular elements. So arsenic, which has did show a statistical relationship in this study, is present in agricultural products, as well as some, chemical products, and rice is a big culprit.

So it's important that, you look into this issue. The environmental working group has, some good data on it, and suggestions of how to mitigate any arsenic exposure if you do continue to eat rice, but it's definitely something you wanna eat in moderation. Now persistent organic pollutants is, a broad category that includes a variety of different types of chemicals, but ones that, do not easily degrade and remain in the environment or they degrade into something else that has a very long life in the environment. So it's not naturally broken down by, like, ultraviolet light from the sun or by microorganisms or other elements in the environment. And we know, for example, PFAS or perfluoroalkyl, compounds, is one example of those types of persistent pollutants, but it also includes DDT and related compounds, dioxins, and, some flame retardants.

And then it mentions specifically phthalates and bisphenol a, and those are two endocrine disrupting chemicals that are essentially plasticizers. And we know about those. And but I wanna mention, when discussing those because it's mentioned specifically bisphenol a, but we have and I did describe this, previously, this kind of policy and industry cycle that has been referred to as the whack a mole, where a because companies are allowed to use these chemicals and put them out in the environment with no safety testing, but then if they are discovered post marketing to be dangerous, then the company has to either they get regulated, they can't use that substance, or the publicity is too negative that, there's an a marketing, advantage or a business advantage to take it out of their product. But when they do this, they simply substitute a similar chemical. So with BPA, for example, they might have a BPA free product, but instead, they'll put BPS in it.

And BPS, another bisphenol, has similar toxicity and chemistry to BPA. So we're really not removing the toxic chemicals. We're just substituting one toxic chemical for another, until it gets discovered that that one is toxic. So as a result, there may be a lot of underestimation of some of these, effects in terms

of the metabolic and other toxic effects. So let's, go to the next, slide here, which is another study done specifically on endocrine disrupting chemicals of which I mentioned a couple, but there are others besides phthalates, and bisphenols.

And in fact, there are some in food, some natural endocrine disruptors as well, like genicine from soybeans. But let me read from this study here, and this was published in twenty twenty three, so this is more recent. In recent years, increasing body of evidences from both human and animal studies have displayed an association between exposure to early unfavorable life factors such as endocrine disrupting chemicals and the prevalence of type two diabetes later in life. The exogenous, EDCs or endocrine disrupting chemicals can lead to disadvantaged metabolic consequences because they interfere with the synthesis, secretion, transport, binding, action, and metabolism of endogenous hormones, insulin being one of them. So you can see that there is accumulating over time more and more data from humans, animals, and even from molecular studies, that support, this causal relationship between environmental chemicals and type two diabetes.

And I'm gonna put one more study up before I get to how we can therapeutically address these issues. And here, this one is looking at perfluoroalkyl substances, so the PFAS forever chemicals and risk. And I'll just read the conclusion statement here. Background exposure to PFASs in the late nineteen nineties were associated with higher type two diabetes risk during the following years in a prospective case control study of women from the, the special, study that's, done with the government for for blood pressure that's used for a lot of purposes. These findings support a potential of diabetic genic effect of PFAS exposure.

So diabetogenic means essentially causing or or creating diabetes. So we see that the official bodies, don't really mention very much these associations with environmental chemicals. However, the research literature is finding more and more evidence of, likely causality here. So if this is the case, is there any further evidence? And how can we address, this particular cause?

So one piece of evidence is that for folks that have tried to address diabetes with just changing their diet have had a lot of success, but not all of them have been able to reverse their diabetes. And those that have reversed it may find that in the future, if they go back to some questionable dietary habits, that the diabetes may, easily return. And in the literature, there the mainstream reports that this is not really considered a cure. So why is this and how do we address it? So we have to look, first, you know, at the obvious.

So one is, is there adequate hydration? And we need to address that. And the reason for that is because the kidneys help, balance the system. And if the blood sugar goes up too high, if it goes up really high, especially, it can be, become dangerous and even an acute emergency. But the kidneys are able to diuresse out the sugar, but we have to have adequate hydration with water, for that to happen.

So it's not going to reverse things, but it's definitely required for the body to maintain homeostasis. And, while we address it, it's vital to be adequately hydrated. Now dietary changes are obviously paramount,

and the most important thing is to get rid of processed food and to get rid of processed carbohydrates from the diet and observe at a minimum a whole food diet. Now in my opinion, a ketogenic or a carb free diet is the best way to optimize healing from diabetes. And so this would be like a ketogenic type diet, and there are a variety of options out there.

But make sure you don't include, you know, keto friendly processed foods. This should only be a whole food, ketogenic diet. And many people can, you know, completely get off any medications, just from doing this. It may take some time, like months, to depending on how severe the situation is. But many of you will find that you won't be able to get complete reversal or, you know, what might be considered a cure, But you you may get a remission, and this is definitely a reasonable way to go.

But why does it not work fully or in everyone? And I in my opinion, the missing link here is these environmental chemicals that are interfering with metabolic and endocrine regulation that are really preventing the last bit of healing. Now many of these compounds actually can be eliminated from your body, or some of them anyway, just from dietary changing or from water fasting or procedures like that. And mostly, those are the ones that are water soluble. However, the seed oils, for example, and the PFAS and dioxin and many other of these compounds are not water soluble.

And the body has a very difficult time eliminating them, and they've been shown to be, present in adipose tissue, in fatty tissue. For example, seed oils tend to be mixed up with the lipids in fats cells that are said to make up the membrane. So when they fractionate them, they find seed oils like linoleic acid, mixed in with the other lipids. Right? And then they've found, other of these chemicals, as I mentioned, also in the fatty tissue.

So your body has a very hard time getting rid of these. And I believe this is, really the missing aspect. So what can you do to address this and get these out of your body? So one thing is, firstly, you want to mitigate exposure, from this point forward. And, two of the biggest exposures to some of these chemicals is one from plastics, and especially if you microwave plastics.

It's been shown that you will leach out some of the plasticizing chemicals, which are endocrine disruptors that I mentioned, previously. So it's very important to, you know, stop using plastics for food storage and especially in the microwave is the most dangerous aspect. Now I I neglected to mention that even some of the plasticizing chemicals that may have some solubility in water, like bisphenols, I believe, and possibly phthalates, oftentimes, they are embedded in microplastic particles, for example, which have also been shown to be prevalent in various organs and tissues in the body. So even if they might be water soluble, these could still be sequestered in those microplastic particles. So how would we, you know, dissolve plastics similar to the fat soluble components?

So what I have found to be have amazing success in this area, and very rapid success is essentially using healing solvents, which are elements from nature. They're oily liquids from nature. Like, for example, castor oil, I've mentioned many times, is an example of a healing solvent. But there is one particular solvent I'm gonna mention in a moment, which can penetrate throughout the whole body when taken

internally. It can go through the skin when used, topically, And it seems to have the best solubility profile to get these really non polar, non water soluble substances and dissolve them out so that your liver can process them and get them completely out of your body.

And I'm referring here to the terpenes of the pine tree. And I have to be careful about how I refer to this, due to censorship because this is a material that used to be, one of the most common remedies. If you go back, for example, to the eighteen ninety nine Merck Manual, you'll find that it was listed as a remedy for, you know, over forty health conditions, including serious life threatening health conditions, and it does remain in one over the counter, product after it was banned by the FDA in the nineteen forties, and that's Vicks VapoRub. And I will be talking more about this in my, natural detox mini course and an upcoming very exciting workshop that, I'll be announcing to you next week. But in my experience, all the clients who I've worked with and other people who have told me you they've used this substance in a protocol because you have to make sure that you use, a protocol and use it wisely and appropriately based on people's experience and success, that they essentially have completely normal blood sugars within three weeks.

Now this, of course, does also involve changing your diet in conjunction, but it happens much quicker than with diet alone. And even people who have not been able to completely get off blood sugar medications, for example, with diet alone have been successful using this approach. But I wanna caution you. There is one, major drawback, which is that your blood sugar will drop so fast that if you continue to take your diabetes medicine, you can put yourself at risk of, an emergency or even death. So the big caution is that if you take any kind of medication that lowers your blood sugar and you're gonna do this type of cleansing using this potent healing solvent, you have to make sure that you taper off or completely stop, when necessary, any of those diabetes medicines because it's far more dangerous for your blood sugar to go too low.

In fact, one percent of people with diabetes end up in the emergency department related to a low blood blood sugar, and there is a high mortality rate. So I just want to give this caution because this approach is so potent. It will happen very quickly, and you wanna be prepared, so you don't bottom out. So, everyone, I hope this has, been an enlightening and educational experience to learn what is truly, likely to be implicated as the main cause of this, unfortunate trend of rising prevalence of diabetes and all its associated complications, disability and mortality, and how you can go beyond just diet and hydration and actually completely reverse this problem by dissolving those environmental toxins out of your body with the most potent, pine based healing solvent from nature. Alright.

That was excellent, Andy. Did you want to mention the power of pine workshop as well? Well, I, know we, haven't opened the doors for that, yet, so I was gonna make a major announcement this week. But if any if you are registered for the natural detox mini course, you will automatically be invited into that workshop. Alright.

Let's go to some questions. We have a question from Zorro. What types of breads are safe to eat? What types of breads? Was that the question?

Yes. What types of breads? If you have diabetes, none. But, in general, if you're in good health and maintain yourself, I think that the Weston a Price, philosophy of nutrition is a pretty reasonable way to go. And they would, say that sourdough breads, are an adequate, way to eat bread.

So I would, support that. Alright. Question from Suspirilla. Is neuropathy a common cause of diabetes and can neuropathy from diabetes be reversible? Well, so neuropathy is not a cause of diabetes.

Neuropathy is a a consequence of diabetes from when I was mentioning the excess sugar in the blood is toxic to various organs and tissues that includes the peripheral nerves. So, you know, it's even referred to as diabetic neuropathy. And, yes, this is potentially reversible, but it's contingent upon reversing the diabetes. Alright. Question from Mackey.

Do you think these findings increase risks of type one diabetes as well? My kids and I are prediabetic, but it seems to be type one. We aren't making adequate insulin. Right. Well, I've never heard of prediabetes for type one, so I'm not sure how accurate that, information may be.

But as you saw from the graph that I displayed about the prevalence of type one and type two diabetes, we don't see, the same kind of increase in type one diabetes. So it doesn't match up with the trends and, has not you know, I'm not aware of any specific research studies. So my, you know, current opinion would be that type one diabetes has a different cause, and it is, of course, much less common. And but it's still there's a a possibility that it can be completely reversed at a minimum. And I have had experience with several clients.

It is definitely possible to substantially lower your insulin requirement, by doing detoxification, as I described. And I've seen clients, reduce it by ninety percent or higher. Right. We have, a question from Bicwell. Does this protocol work for those who have many diabetic, or type two diabetic symptoms like heart circulations, etcetera?

Well, you know, usually, in situations like this, they're all of those conditions have similar or the same cause, generally from toxicity with a variety of different chemicals, and other factors like chronic dehydration. So, you know, the healing approach is gonna be similar if they're all have a similar cause. And this is, you know, see, what is shown in the literature is that there are a lot of associations of other chronic diseases, with diabetes. Alright. Last question.

Can vitamin b one help with diabetes type two diabetes? Well, I mean, certainly, we need to have adequate, nutrition in order to heal properly. But, you know, there is a misconception out there that you can just, you know, go and take a substance, one single substance or one single pill, and it can, by itself, actually do something in your body. So I wanna, you know, clear it up that one is only your body can actually heal. And any materials you provide are simply supporting the body's actions, they stimulate the body to do something.

So our bodies react to that substance. Now with most pharmaceuticals, the reaction would be, you know, similar to poisoning. And that can sometimes relieve other symptoms that we have because the body

says, oh, there's a bigger emergency to deal with this poison. We'll forget about, you know, that problem for a minute, and you can get symptomatic relief. So we've got to start thinking about that now.

Just, you know, taking some isolated vitamin made in a chemical factory and putting in your body is not gonna stimulate your body, you know, to heal completely from a complicated, process like diabetes. Even using the healing solvent that I was discussing about, that's just one element in an overall protocol, and you can't just, you know, willy nilly use that either by itself. And you can, you know, it's gotta be a comprehensive approach to create the necessary conditions that your body can take the action to fully heal itself from these metabolic derangements. Alright. That was excellent, Andy.

Thank you so much for that wonderful presentation. Guys, don't forget our second three day mini detox presentation takes place tomorrow at eight PM ET, so make sure to register using the link down below. Now without any further ado, would you like to mention anything else, Andy, before we close off? Well, I just wanna say that, it was a pleasure to, deliver this information. I know there are many people, who can benefit, from this, and we can really turn around, this pandemic of diabetes completely, with, you know, very low cost and mostly lifestyle changes.

So I look forward to seeing all of you next week as well as tomorrow evening for the natural healing mini course. I will see you all then. Alright. Go on. Cheers.

Read transcript to 46min mp3 dr kaufman Healthy Living Livestream_ What Makes Toxins Stick Around_ (And How To Unstick Them)

Hello, and welcome everybody. This is the Healthy Living Livestream episode number ten with doctor Andrew Kaufman. Today's topic is toxin solubility and safely removing lipophilic fat soluble toxins that your body has a hard time eliminating, such as PFAS, flame, flame retardants, dioxins, pharmaceuticals, and much more. If you guys have any questions for Andy, make sure to write them down on the chat, and we'll make sure to address as many as we can right after the presentation. What's also happening this week is our brand new terrain workshop, the power of pine, the ultimate detox, which takes place on Sunday at eight PM in the afternoon at eastern time.

You can find the link in the chat to register now. With that having been said, the stage is now yours, Andy. I look forward to your presentation. Thank you very much, Alexander, and, welcome to another Healthy Living livestream. We kind of, continue with our topic of talking about, toxins and their relationship to illness.

And, today, as many other weeks, when I talk about the solutions, I am including some materials that I'm not permitted to speak freely about on these public platforms, unfortunately. And I'm specifically talking about healing solvents, such as, pine derived solvents. And I wanna get this information out to you, so I have planned this major workshop, the power of pine, this Sunday where I will reveal all the details and give you a protocol to teach you exactly how to use this healing substance to alleviate the problem with

all the different kinds of toxins that I've been reporting on, and today is no different. So I wanna start today's program to talk about just the general property of solubility because this turns out to be a key reason why certain substances are more toxic, as well as a key understanding that your body can't readily get rid of these substance certain substances. And you need to use some natural healing materials in order to facilitate this, including, you know, modifying your diet correctly.

So if we could bring up the first image here, we all know that oil and water do not mix, when we've tried to put them together. In fact, many of the cleaning agents, like surfactants and, dishwashing detergents, act specifically to emulsify the fats to allow them to be compatible in the water and be rinsed away, like when we have greasy dishes or grease stains on our clothing for the laundry. So we're kind of familiar with this aspect, And I want you to kind of imagine how sometimes these grease stains set in and are very hard to remove. And we're gonna see that the same thing happens toxic substances. So the basis of this property that oil and water stay separate is because of their polarity.

And this is a a way of looking at particular substances or molecules of how the charge is distributed in that molecule. So, of course, they could be ionic and actually carry a charge, in which case, those are mostly for very polar substances, right, because they have, two poles of charge. Right? The charge is kind of separated across the molecule in some way. And then we have nonpolar substances, and those have a more even charge distribution, and those are the oily fat soluble type of substances.

So how does this affect, you know, toxins, in in the environment or that we're exposed to? So a number of ways. So firstly, and we can, take the slide down for now. Many of these substances that are fat soluble persist in the environment. In other words, through exposure to natural elements like being, you know, ingested by animals and microorganisms, also being exposed to ultraviolet light, etcetera, do not degrade these substances.

They are persistent organic pollutants, is the industry or the scientific, term from environmental toxicology that describes many of these substances. So because they persist for such a long time, this in itself is problematic. For example, PCBs or polychlorinated biphenyls, which are one of these types of compounds, were rendered illegal for use in industrial products in nineteen seventy seven. However, in the present day, in the, twenty twenties, they have been shown in research to still persist in biological organisms. Right?

So some, fifty years almost after they were made illegal and stopped being put in products. So this gives you a little bit of an idea of how persistent some of these chemicals are. Now there are two other aspects that are very important to relate to their toxicity, and they have to do with the fat solubility aspect. Because fat soluble chemicals will tend to accumulate in our tissues in our fatty tissues, and this is known as bioaccumulation. So in other words, when they enter our body, they're rather than being removed, they're stored in the fatty tissues, and they accumulate over time.

Now, this is compounded when we take a step out and look at the ecosystem or the food chain. And if you could bring up that next slide, there's an additional property called biomagnification. Sorry. The one

it's the one after that. Yeah.

There you go. So we'll go back to that previous slide. So here we can see, a graphical representation of this process and the little, I believe they're, with four dots, the plus signs in there represent the bioaccumulation bioaccumulation of these fat soluble or lipophilic toxins. And you could see on the bottom, the bottom of the food chain is the grass, or the plants, and that's eaten by rodents. And you could see that there's some small level in the plants, and then the rodents have a higher level.

And then when we go up the food chain, you could see that with each higher predator, there is an increase, or magnification of the levels of these toxins. And since humans are on the very top of the food chain, we would have among the highest, levels according to this model. Now if you can go back to the prior slide, Alexander, this is an example of some of the particular chemicals that are in this category. And these particular ones were part of the United Nations treaty, quite a a while ago, I believe, in the late nineties, whereby all these signatories were reducing they their use of these compounds for industrial applications because of this problem. But as you know from previous, livestream programs on this topic, there is the chemical whack a mole phenomenon that once certain substances are identified as being harmful and toxic and removed from production, that the chemical companies and other industrial corporations simply substitute, similar chemicals that are, you know, unknown have unknown toxicity and put those out like with the bisphenols, as I have discussed in detail.

Now in addition to these compounds, I think, and Alexander did mention this in his intro, it's very important to consider pharmaceuticals in this category. And especially pharmaceuticals that are used, for issues said to be related to the brain, and I'm talking about psychiatric or psychotropic medications, for example, as well as medications that may be used in things like Parkinson's disease, and other central neurologic disorders because, fat soluble compounds go into the brain and and are stored in the brain and in fat fatty tissues. So it's important to realize that, many pharmaceuticals are fat soluble. In fact, this is a challenge for the manufacturing and formulation of pills and capsules, and to ensure absorption into our body. But this is a very important category.

And even if we're not taking these pills voluntarily, they're present ubiquitously in municipal drinking water. And there may be other sources as well, such as passing from a mother to baby. So how do these chemicals enter our body? Well, there are several routes, that they could potentially enter. In other words, through our, oral ingestion, through inhalation, and, of course, through the skin and eyes.

However, what's been shown is that these particularly lipophilic or fat soluble toxins are predominantly absorbed, through ingestion or eating. So it's very important, to be careful about what you eat. Could it be contaminated with these substances? But there are still other routes that it could potentially get in, as I mentioned. But when it is ingested, these chemicals are treated by your body very much the same way as dietary fats and fat soluble nutrients like vitamin a and d, and k, for example.

And which means they are taken up into the cells in your gut and put into lipoproteins similar to cholesterol. Initially, they're called chylomicrons. And, then they are essentially distributed to the

appropriate places in your body similar to how the nutrients would be and predominantly to the liver. And the liver is a very, very important, for the metabolism of these substances because the liver has a series of enzymes known as the phase one and phase two enzymes, and more specifically, the p cytochrome p four fifty enzyme system, which many of you may have heard about because of metabolizing drugs, plays an important role. And the overall purpose of the system and it's I think of it like a mini chemical factory in your liver that processes toxic chemicals and essentially renders them nontoxic, at least as much as possible.

It converts them from being non water soluble to being water soluble. And if it can't do that, it simply excretes them in the bile. And this is, exactly what we see happening in, animals that are given these, fat soluble toxins. Now beyond that, they become because they don't all get excreted, as I mentioned earlier, they accumulate in your bodies and tissues. So where have they shown to be distributed in the body?

If we could bring up the next slide. So he this is, a review article that has a table where it lists various studies showing, the location of the biodistribution of some of these fat soluble toxins. So we can see from, autopsies of humans even are included in this, and we see that PCBs or polychlorinated biphenyls, which I mentioned earlier, were found in the liver, brain, and in the fat or adipose tissue. In a rat study, looking at a certain type of dioxin, it was found in adipose tissue and in the thyroid and adrenal glands. So, you know, we can see how various of these toxins may be distributed differently in the body and may involve many of our vital organs and perhaps even especially the endocrine or our hormonal system.

Now another dioxin study, was shown to collect in fat tissue, liver, and in skin. And the skin is an important thing to mention because the skin, various skin cells have all of the liver phase one and two enzymes and kind of act as a backup system for the liver. So if our livers are incapacitated or overwhelmed, then our skin may be, doing some of this metabolic work, and that could, of course, manifest as various types of skin rashes and lesions. So we can see that, these toxins may be deposited in various places of your body, but especially in the fat, liver, and brain that we've seen across various studies. And, also, there have been additional human studies showing various of these chemicals in those organs and tissues as well.

So let's, I talked a little bit about metabolism and and how the body can, remove these substances by making them more water soluble. But because they are stored in the body's, fat deposits and organs, they can persist for quite a long time and never make it to the liver, to be metabolized. And depending on which compound we're talking about, animal studies and some epidemiologic data has shown half lives of these compounds from two years all the way up to twenty nine years for polybrominated biphenyls, which are related to PCBs. And what I'm talking about here with the half life is the amount of time it takes for the amount of it in your body to reduce by one half. And then another so if it took twenty nine years, right, in twenty nine years, it would be half as much it is as it is now.

And then in another twenty five years, it would be half as much as that. So you can see that these things never quite fully get out of the body. And just to reduce by, factors of two, it can take quite a long time.

Of course, this is without helping them along by various tactics I'm going to describe momentarily. And in addition to the cytochrome P450, some in some studies, there have been sulfation and glucuronidation, which are part of the phase two pathways shown to help metabolize and excrete these toxins.

And as I said, the liver is really the main organ, involved here. Now after the metabolism exists, then hopefully your body is able to excrete or eliminate, these substances. And there have been several studies looking at that. And what they found is that depending on the substance, will determine how it's excreted. So for example, if it can be converted readily by the liver's enzymes to a water soluble form, then it will get back into the blood and be eliminated through the kidneys, into the urine.

So that's a very, you know, good result. However, some of these compounds, can't really be broken down or made into more water soluble versions. So either they resist any metabolism and stay in their original form or, more commonly, they form a metabolite, but that metabolite is also lipophilic. So these can't get out through the kidney, so they end up getting out of the body in two ways. One is that the liver will dump them into the bile because they could be emulsified with the bile salts, and then they'll be excreted into the intestines and make it out into the toilet that way.

But there's also what's called non biliary excretion into the feces, and that is a way where it goes directly through the blood to the colon and is dumped into the feces that way. And that's an important mechanism, actually, because it allows for kind of the overflow from the liver to still make it out of the body. Now I wanna mention, another excretion pathway that may not be relevant to everyone, but certainly, to a number of young folks, which is lactation. So there have been demonstrated in multiple studies, human and animal, higher levels of these, persistent lipophilic compounds in breast milk. And it's a way that the mother can actually get rid of them out of the body, but at the expense perhaps to the baby.

So it's very important to be aware of this, to prepare for, having a child, and to consider, you know, the possibility that, this could be a common issue. So let's bring up the next slide, which kind of summarizes, everything I've told you so far about how the body, interacts with these toxic, compounds. And you can see that in, our diet is the source of them, and it is through, you know, contaminated meat as well as various additives, and contamination of plant foods. So it's really somewhat ubiquitous, unless you're making special effort to find food that is grown in a responsible and natural way. It's absorbed through the intestine and, as similar to dietary fats and other fat soluble nutrients.

And then it, gets into the blood. And, also, it's been shown to go into the lymph. Some of it goes to be stored in various tissues, like on the right lower side of this diagram, such as the muscle, the brain, and the adipose tissue or fat. Some of it goes to the liver, for metabolism, and some of that goes and gets excreted through the bile and the intestines, but some of it goes back in the blood, and some of that may be excreted by that non biliary root that, we mentioned. But you can see that on the bottom right, those storage areas, if we, you know, continue a lifestyle and continue to accumulate these substances, those squares will get bigger and bigger, and it will, overwhelm the system at some point.

So what about the toxicity of these substances? What is known? And, what are the challenges or limitations to our current state of knowledge. Well, toxicology field in general has mostly looked at acute poisoning, with high doses of compounds to determine the lethal dose. So many of these compounds have shown to be acutely toxic at high levels.

However, what is much less, research data available is low level chronic exposure. And these kinds of studies obviously are more difficult and expensive to do because you have to expose experimental animals over longer periods of time to assess the effects and perhaps even over generations. Many experimental animals don't live nearly as long as we do. So there are some research limitations to that. In addition, what about looking at combinations of these toxins rather than individual toxins?

And there's very little research. And this, of course, reminds us of the lacking research also for combinations of vaccines versus individual vaccines looking at potential adverse outcomes. Then we also have the metabolites of various of these compounds. Remember, I mentioned that sometimes the liver enzymes can't make it water soluble, and instead, they get another fat soluble metabolite. And that may have potentially even more toxicity than the parent compound.

And there's very, very little studies looking at those metabolites. And then there are other potential complications such as, new emerging research on microplastics shows that many of these fat soluble compounds can be mixed and embedded in microplastics, and that may change, their effects on the body. And that is a very new field, only starting to be looked at. But we do have, some data. And, if we could bring up the, slide from the CDC.

So now here you can see, directly from the CDC, they have, a database of, environmental toxins that I talked about on the last livestream. And right there at the top, they put a disclaimer speaking to one of these challenges, which states potential adverse human health effects of low level environmental exposure to PCBs are complex and still need further validation. So in other words, there's not much research data. But here, they do report on a variety of toxicity of PCBs, which, as I mentioned before, is still found in our tissues even though they've been illegal since, the late nineteen seventies. And these include, you know, causing cancer, a fatty liver, enlarged liver, immunosuppressant effects, neurotoxicity, porphyria, which is a a blood disease, reproductive and developmental toxicity, thyroid hormone level alterations, all common health problems in the modern era.

And we do have, another review article on the next slide here. Now this is an epidemiologic study, so we have to take it with a little bit of a grain of salt. But, there was a remarkable consistency across studies and across different outcomes. And they stated in their summary here, in conclusion, you know, as highlighted in this review, several lines of research evidence support the view that persistent organic pollutants of different chemical classes could be linked to lipid abnormalities, carotid atherosclerosis, that is essentially strokes, and overt cardiovascular disease like myocardial infarction and stroke. So in other words, being linked to heart attacks and strokes.

So this is epidemiologic, but it is consistent with, everything else that we know about what's going on with these toxins. So as we can see, these certainly are a health concern and especially because of their persistence, bioaccumulation, and bio So what can we do, to address these and help get them out of our body? Well, fortunately, there is some initial research that does show various, successful strategies, which I have capitalized, in my own protocol, as I'll mention, to help your body get rid of these pollutants. But there are some risks and drawbacks. So one of the keys, of course, is to help get rid of excessive fat in your body because that's the part of your body that's storing these.

So a bonus of this treatment approach is that you will have resultant weight loss. And fasting or, you know, they sometimes in research with animals call this, you know, starvation or, caloric deprivation. But, essentially, what they did was fast a variety of animals to see the effect because they knew that the fat would break down, which is called lipolysis, during fasting. And what they found is that it did result in increased excretion of these toxins, and it did result in lower levels of the toxins in fatty tissue. But, unfortunately, what they also found is that when the fat broke down and these compounds were liberated into the blood, that the liver and the excretory systems must have been overwhelmed because some of these materials actually went to other tissues and settled there.

And the levels in those tissues were higher than in the control group. So in other words, during fasting, these the fat breaks down. It releases the fat soluble toxins into the blood, but it releases too many and they end up going into other tissues, even though more of them are getting out of the body, than eating the previous diet. So this is, definitely a risk. And in various animal studies, the toxins were shown to move to the brain, which of course is very worrisome, the liver, the kidney, the blood, or being persistently in the blood and the muscle.

And this is, consistent with some other human, experiences, showing, you know, strong cleansing reactions to some of the interventions used to try and liberate these toxins. In other words, they're floating around the blood and irritating tissues around the body causing all kinds of, uncomfortable symptoms. So fasting alone would not be an adequate way, to address this, but we definitely do need to initiate lipolysis or fat breakdown in the body. Now if we do it with a certain type of cleansing diet, which is, a very clean type of diet, then we can have more gradual fat breakdown that will not be as likely to overwhelm our system. And we can also, employ additional procedures to help our body, work to eliminate these compounds readily.

In other words, address our liver, make sure our liver is in good working order, and give it the right nutrients in our diet to make all of the enzymes that will neutralize these toxins. And, of course, we need to consider what kind of diet will have good results. And there is data for two different types of diets, in animal studies that has shown, with just a dietary intervention to actually reduce, and the levels of these toxins and increase excretion. And these would be one is a high fat diet. And that would be like a zero carb or ketogenic type of diet.

And the and that also, since it would be high in meat, it would supply all the essential liver nutrients. But it's important also to add a trace mineral supplement, such as my Shilajit, in order to provide the right

minerals for the metalloprotein enzymes of the liver to function. And the other type of diet, would be a high fiber diet because administration of soluble toxins. Now, of course, as I was mentioning, it's important to have support your body when you're trying to get rid of these things that you have good bowel flow. And there are a number of ways you can stimulate your bowel flow, such as with laxatives, and enemas, as well as good urine flow, which means you have to be well hydrated.

And those are very, important. Now I wanna, mention one more thing before I show you another study, which is that there's also data that substances like zeolite, or ion exchange media, as they're referred to. And much of the research was done with cholestyramine, which is a pharmaceutical. But all the properties that were, useful, also, apply to zeolite. And zeolite has also been shown to bind fat soluble, chemicals such as hydrocarbons, effectively is that when this was added to the diet, it also increased excretion.

So we see now a number of strategies through fat breakdown, the diet, increasing elimination, working on the liver, and using, ion exchange media like zeolite can all increase, excretion. But there's one very powerful method, in addition to this that I want to, discuss, and we can bring up, the next slide now. And this is, a study using an Ayurvedic detoxification, protocol, which is very interesting. And, they did a week by themselves at home, where they had a very, low fat diet interestingly, and which I assume was high in fiber, as I mentioned, one of the effective diets. They also took some, herbal preparations, including some fruit based laxatives, and, they did, castor oil at least one time as a, purgative, to stimulate bowel elimination.

And then they went into the clinic and did, herbal massages and an herbal enema, for five days. Now the the key intervention aside from these general detox procedures was that they actually took, liquid clarified butter shots every day. And the dose was determined based on some I have Ayurvedic, principles, but essentially, you know, they're taking a glass of clarified butter. And why is that? Now the idea here is similar to a high fat diet that we're adding a solvent that can dissolve the fat soluble toxins and help them get out of the fat tissues and organs where they're stored and get to the liver where they could be processed in elimination and perhaps even going by the non biliary route to get them straight to the colon, for excretion.

Now in addition to this study, I wanna mention there were several other studies done with, oils that were considered to not be absorbed. So the idea was that you could sequester and dissolve the toxins in the gut. And, because you're using an oil that when swallowed doesn't get absorbed by the body. But what they found out, interestingly, was that those those oils actually do get absorbed because they found them in the same organs they found the fat soluble toxins. But despite that, they still consistently increase the excretion and decrease the body burden of those fat soluble toxins.

So this is a very similar strategy, but here we're using a dietary fat, right, of clarified butter for this purpose. Now you can see from these bar graphs that the detox group is on the left and the control group is on the right. And these are the levels of various of these fat soluble toxins, and you can see there was a major reduction. So the one on the light the left is PCBs, and the one on the, right is transnona chlor,

which I believe is a chlorinated pesticide. And on the next slide, you can see, several additional toxins that all had, reductions.

Now the bottom right is a little bit different because that's pretest and posttest, rather than detox and control group. So you can see there, it's looking at PCBs again, but the other three graphs are looking at, different toxins. DDE had the, worst results on the top left. But I want you to know that this was only a two week protocol, and it still had, these significant, results. So this is quite promising.

Now the what I think is actually a superior way, to address this than clarified butter or the synthetic supposedly non absorbable oils would be to use nature's most potent healing solvent. And that is the pine derived solvent that I mentioned earlier that I can't talk about in detail. But what I can say is that it's just the distilled sap of the pine tree. So it's a very simple solvent, and it is extremely effective at dissolving oily and greasy substances, including plastics. In fact, it can't even be stored in a plastic vessel because it will soften and dissolve, the plastic and ultimately leak out.

So on the upcoming Power of Pine workshop, which I mentioned earlier, I'll be discussing in detail exactly how you can combine all of the strategies I mentioned today, which are all supported by research data. And I'm talking about the right kind of diet, either a high fat or a high fiber diet, proper hydration, addressing the liver to make sure it's in good functioning and supporting it with the right nutrients and minerals, using an ionic exchange medium such as zeolite, and topping it all off with nature's most potent healing solvents. So I hope you'll join me to learn more about that. And as always, I will be back next week with a brand new healthy living livestream. So until then.

Alright. That was great, Andy. Very well done. Let's go to some questions. Let's see.

We have a question from Markhametz Sonic. What causes fecal inconsistency and can it be reversed? Thank you in advance. Well, there can be multiple, different causes of, fecal incontinence, everything from, malabsorption syndromes of the food to, neurological, problems to various types of treatment like cancer treatments, you know, tumors, etcetera. So I would really need more, specific information in order to know what the cause is.

And, of course, you know, my opinion is that almost any health problem can be reversed if you can understand what the underlying cause is and then take steps, to reverse that. Alright. Question from Eric. When taking the pine cilantro or zeolites, what will I notice as far as detox other than feeling better overall, very tired in the AM? Well, it definitely depends on, you know, what problems, you're trying to address.

So, you know, if the problems are due to fat soluble toxins or other toxins that will, you know, detox out of your body during such a protocol of which there are many, then whatever health problems, those may be causing will begin to experience relief. Now if you're doing this, you know, just for your general health or to prevent future problems, then most likely, what you'll notice is that, some various lingering issues, some of which you may have attributed to aging or maybe their minor aches and pains or tweaks that you sort of don't even think about because you're just used to them or you consider them normal,

will start to disappear. And you'll notice, increased level of vitality, you know, meaning, energy, mental clarity, all those, types of aspects. So remember and, of course, you know, fat loss, and that would be, significant. Alright.

Oh, question from Zorro. Does the detoxification protocol also remove molds and parasites in our bodies, or is another protocol required? Well, any, you know, microorganisms or parasitic organisms which are in our body, are always trying to restore balance. So if we have these kinds of toxins hanging around, that's what would attract those organisms to proliferate to try to clean it up. So if we take steps to help our body remove these things, then, of course, those organisms don't need to be around anymore.

So, personally, when I've done this, pine solvent protocol, I did have worms come out in the toilet, and I've had, of course, many clients also, send me pictures, asking me what that was. And so we definitely have seen that, happen a lot. But it's not the kind of process that you would get a severe, die off reaction because we're not the we're not killing parasites. We're simply removing toxins, and then parasites no longer have, food or a place to live. So they just peacefully leave us and, seek shelter elsewhere.

Alright. Well, I think that was it for all the questions. Let's see. We have, just one minor question from from Mindy. What about clearing toxins that cause floaters in the eyes?

Yes. That is certainly possible. And, there is another healing solvent that's very good for, optical, use, which is made from, the paper making process, and it's it's been used a lot in veterinary medicine. It's called DMSO. And so that might be something to consider.

Or you may notice that this kind of thing clears up if you do the kind of protocol, that I am talking about even though it doesn't specifically relate to the eyes. Alexander, there was a one question I would I'd like to take there about, congestive heart failure before we finish, if that's alright. Let me see. Congestive heart failure. Is it a recent question?

Yes. It starts off, I have edema related to congestive heart failure, and so not supposed to drink a lot of liquid. Should I try to drink this suggested amount of water? Anyway, so this is, an excellent question and, something that I have, dealt with, recently with having a couple of clients dealing with congestive heart failure. And so one thing is is that I believe, actually, some of the major causes of congestive heart failure are these lipophilic toxins.

So I think that the power of pine is definitely, a central treatment strategy to address this issue. But the water is critical because in heart failure patients, they often have symptoms that are problematic related to their body retaining water and, putting it in what they call a third space. So, like, into the lungs with pulmonary edema, as well as edema of the usually lower extremities, so the feet and ankles. And it it can even go up to the entire body and that's called Anasarca. Now, the conventional medical approach is to dehydrate you to get that water off.

So they give you diuretics, right, which essentially make your kidneys get rid of more water, and they also restrict your fluids. Now this does temporarily relieve symptoms in many cases, but, it has consequences because you're the longer you keep up with this strategy, you put your body into a

chronically dehydrated state, and then it has a difficult time, getting blood to all the organs because the blood is too thick from dehydration. So my approach, of course, is different. I realized that that water that is, third spacing where it's not supposed to be is full of toxins and it's denatured. And the only way to get rid of it is to support the body's cleansing mechanisms.

And part of that is to provide enough water that the body can get rid of that water and dissolve, you know, the toxins to get them out, or at least to bring them to the liver if they're not water soluble. So in the clients that I work with, what they do is the exact opposite is they stop using diuretics and they increase their water, but they do it in a very careful way, not chugging all of it at once, but spreading it throughout the day. And what happens is they actually, the edema resolves and the symptoms go away. And, of course, if we report this back to the doctors of how much water these folks are drinking, they would, you know, think it was an emergency that they wish to give them IV diuretics right away. But then, you know, they would have to mention that they're actually feeling better.

So this is definitely a different way to look at it, and the results are are far superior, you know, to what you would expect from the mainstream. So I encourage any folks with heart failure or know of someone with heart failure that this would be really an excellent approach, for you. And, in case anyone didn't know, I do offer individual consultations, where I can teach, about various approaches to your health problem. And, those will be available, of course, on my website and, in my, Linktree and, all those typical places. Alright.

Well, excellent. Everybody, make sure to register for the upcoming workshop, the power of pine, the ultimate detox this Sunday at eight PM in the afternoon and eastern time. Even if you can't make it, you will get lifetime access through the reprel the through the replay in your email. Now with that being said, Andy, do you have any final remarks before we close it off? Just, that we'll see everyone next week, same time, same channels.

Alright. Cheers, everybody. See you next time.